Fill in this information to identify your case:			
United States Bankruptcy Court for the:			
EASTERN DISTRICT OF NEW YORK	-		
Case number (if known)	Chapter you are filing under:		
	■ Chapter 7		
	☐ Chapter 11		
	☐ Chapter 12		
	☐ Chapter 13	_	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your	Umeliah First name M Middle name Rahim	First name Middle name
	meeting with the trustee.	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years		
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-7282	

Del	otor 1 Umeliah M Rahim		Case number (if known)			
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.			
Include trade names and doing business as names		Business name(s)	Business name(s)			
		EINs	EINs			
5.	Where you live	47 Whalen Court	If Debtor 2 lives at a different address:			
		Brentwood, NY 11717	Number Ctreet City Ctate 9 7ID Code			
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
		Suffolk County	County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing	Check one:	Check one:			
	this district to file for bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.			
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			

Det	otor 1 Umeliah M Rahim					Case number (if known)		
Par	t 2: Tell the Court About	our Bank	cruptcy Case					
7.	The chapter of the Bankruptcy Code you are		Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.					
	choosing to file under	■ Chapter 7						
		☐ Chap	ter 11					
		□ Chap						
		☐ Chap						
8.	How you will pay the fee	abo	out how you ma	pay the entire fee when I file my petition. Please check with the clerk's office in your local cout thow you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit				
			•		. If you choose this op	otion, sign and attach the Application for Individ	duals to Pay	
			•	Installments (Officia	•			
	☐ I request that my fee be waived (You may request this option only if you are filing f but is not required to, waive your fee, and may do so only if your income is less than applies to your family size and you are unable to pay the fee in installments). If you of the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file					your income is less than 150% of the official period in installments). If you choose this option, you	overty line that	
9.	Have you filed for bankruptcy within the	■ No.						
	last 8 years?	☐ Yes.						
			District		When	Case number		
			District		When	Case number		
			District		When	Case number		
10.	Are any bankruptcy	■ No						
	cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.						
			Debtor			Relationship to you		
			District		When	Case number, if known		
			Debtor			Relationship to you		
			District		When	Case number, if known		
11.	Do you rent your	■ No.	Go to line 12	2.				
	residence?	☐ Yes.	Has your la	ndlord obtained an	eviction judgment agai	nst you?		
			□ No.	Go to line 12.				
				. Fill out <i>Initial State</i> bankruptcy petition.		n Judgment Against You (Form 101A) and file	it as part of	

Deb	tor 1	Umeliah M Rahim				Case number (if known)
Part	3:	Report About Any Bu	sinesses	You Own	as a Sole Propriet	tor
12.		ou a sole proprietor y full- or part-time ess?	■ No.	Go to	Part 4.	
			☐ Yes.	Name	and location of bus	iness
	busing an ind separ as a d	e proprietorship is a less you operate as lividual, and is not a late legal entity such corporation, ership, or LLC.			of business, if any	
	sole p	have more than one roprietorship, use a ate sheet and attach		Numb	er, Street, City, Stat	te & ZIP Code
		is petition.		Check	the appropriate bo	x to describe your business:
					Health Care Busin	ness (as defined in 11 U.S.C. § 101(27A))
					-	Estate (as defined in 11 U.S.C. § 101(51B))
					•	efined in 11 U.S.C. § 101(53A))
					-	er (as defined in 11 U.S.C. § 101(6))
					None of the above	
13.	Chap Bank	ou filing under ter 11 of the ruptcy Code and are small business	If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropries deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statemed operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the process in 11 U.S.C. 1116(1)(B).			
		definition of small	■ No.	I am n	ot filing under Chap	oter 11.
		ess debtor, see 11 . § 101(51D).	□ No.	I am fi Code.	ling under Chapter	11, but I am NOT a small business debtor according to the definition in the Bankruptcy
			☐ Yes.	I am fi	ling under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.
Part	4.	Papart if You Own or	Have Any	Hozordo	us Proporty or An	y Property That Needs Immediate Attention
		ou own or have any		Tiazaiuo	us i Toperty of All	y Froperty That Needs Infiliediate Attention
14.	prope	erty that poses or is	■ No.			
	of imi	ed to pose a threat minent and fiable hazard to	☐ Yes.	What is t	he hazard?	
	public health or safety? Or do you own any property that needs immediate attention?			iate attention is why is it needed?		
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	the property?		
		-				Number, Street, City, State & Zip Code

Debtor 1 Case number (if known) Umeliah M Rahim Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling About Debtor 2 (Spouse Only in a Joint Case): About Debtor 1: 15. Tell the court whether You must check one: You must check one: you have received a I received a briefing from an approved credit ☐ I received a briefing from an approved credit

briefing about credit counseling.

> The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

counseling agency within the 180 days before I filed this bankruptcy petition, and I received a

certificate of completion. Attach a copy of the certificate and the payment

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

plan, if any, that you developed with the agency.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

> I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Deb	otor 1 Umeliah M Rahim			Case numb	er (if known)		
Par	t 6: Answer These Quest	ions for Re	porting Purposes				
	What kind of debts do you have?		Are your debts primarily consu		fined in 11 U.S.C. § 101(8) as "incurred by an		
			☐ No. Go to line 16b.				
			Yes. Go to line 17.				
				ess debts? Business debts are debts ent or through the operation of the bus			
			☐ No. Go to line 16c.				
			☐ Yes. Go to line 17.				
		16c.	State the type of debts you owe that are not consumer debts or business debts				
17.	Are you filing under Chapter 7?	□ No.	l am not filing under Chapter 7. G	Go to line 18.			
	Do you estimate that after any exempt property is excluded and			ou estimate that after any exempt prople to distribute to unsecured creditors	perty is excluded and administrative expenses ?		
	administrative expenses are paid that funds will		No				
	be available for distribution to unsecured creditors?		□ Yes	es			
18.	How many Creditors do you estimate that you owe?	1 -49		1 ,000-5,000	1 25,001-50,000		
		□ 50-99		☐ 5001-10,000	50,001-100,000		
	□ 100-199 □ 200-999		• • •		☐ More than100,000		
19.	How much do you	□ \$0 - \$5	0,000	☐ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion		
	estimate your assets to be worth?	□ \$50,001 - \$100,000		□ \$10,000,001 - \$50 million	☐ \$1,000,000,001 - \$10 billion		
			01 - \$500,000	☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion		
		\$500,0	01 - \$1 million	□ ψ100,000,001 - ψ300 million	- Word than \$50 billion		
20.	How much do you estimate your liabilities	□ \$0 - \$5		\$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion		
	to be?	-	1 - \$100,000	☐ \$10,000,001 - \$50 million ☐ \$50,000,001 - \$100 million	□ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion		
		■ \$100,001 - \$500,000 □ \$500,001 - \$1 million		□ \$100,000,001 - \$100 million	☐ More than \$50 billion		
			•				
Par	t 7: Sign Below						
For	you	I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.					
		If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.					
		If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).					
		I request r	I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.				
		bankruptcy and 3571.	I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.				
			ah M Rahim M Rahim	Signature of Debte	or 2		
			of Debtor 1	Cignature of Debte			
		Executed	on 7/31/18	Executed on			
			MM / DD / YYYY	MN	M / DD / YYYY		

Debtor 1 Umeliah M Rahim	1	Cas	Case number (if known)		
For your attorney, if you are represented by one	under Chapter 7, 11, 12, or 13 of title 11, Unit	ted States Code, and have e	informed the debtor(s) about eligibility to proceed explained the relief available under each chapter debtor(s) the notice required by 11 U.S.C. § 342(b)		
If you are not represented by an attorney, you do not need to file this page.			vledge after an inquiry that the information in the		
	/s/ Adam C. Gomerman	Date	7/31/18		
	Signature of Attorney for Debtor		MM / DD / YYYY		
	Adam C. Gomerman				
	Printed name				
	Adam C. Gomerman, Esq.				
	Firm name				
	807 East Jericho Turnpike				
	Huntington Station, NY 11746				
	Number, Street, City, State & ZIP Code				
	Contact phone 631-549-1111	Email address	agomerman@optonline.net		
	2440238 NY				
	Bar number & State				

Fill	in this ir	nformation to identify your	case:				
	otor 1	Umeliah M Rahin					
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	First Name	Middle Name	Last Name	_		
	otor 2 use if, filing)	First Name	Middle Name	Last Name	_		
Unit	ed State	s Bankruptcy Court for the:	EASTERN DISTRICT C	DF NEW YORK			
					_		
(if kn	se numbe _{own)}	er				☐ Chec	k if this is an
						amen	ded filing
		Form 106Sum					
		•		nd Certain Statistical Infor			12/15
infor	rmation.	Fill out all of your schedu	les first; then complete th	e are filing together, both are equally re ne information on this form. If you are f k the box at the top of this page.			
Part	1: Su	ımmarize Your Assets					
						Your a	ssets
						Value	of what you own
1.	Schedu 10 Cor	ule A/B: Property (Official F	form 106A/B)			\$	313,227.00
						· —	· · · · · · · · · · · · · · · · · · ·
	1b. Cop	by line 62, Total personal pro	pperty, from Schedule A/B.			\$	3,200.00
	1c. Cop	y line 63, Total of all proper	ty on Schedule A/B			\$	316,427.00
Part	12: St	ımmarize Your Liabilities					
						Your I	iabilities
						Amour	nt you owe
2.		lle D: Creditors Who Have C by the total you listed in Colu		(Official Form 106D) the bottom of the last page of Part 1 of S	chedule D	\$	293,131.00
3.	Schedu 3a. Cop	ale E/F: Creditors Who Have by the total claims from Part	Unsecured Claims (Official 1 (priority unsecured claim	ll Form 106E/F) ns) from line 6e of <i>Schedule E/F</i>		\$	0.00
	3b. Cop	by the total claims from Part	2 (nonpriority unsecured of	claims) from line 6j of Schedule E/F		\$	4,940.13
				Your to	al liabilities	\$	298,071.13
							200,011110
Part	13: St	ımmarize Your Income and	d Expenses				
4.	Schedu	lle I: Your Income (Official F	orm 106I)				4 400 00
	Copy yo	our combined monthly incom	ne from line 12 of Schedule	? l		\$	1,100.00
5.		lle J: Your Expenses (Officia our monthly expenses from I				\$	1,101.00
Part	t 4: Ar	nswer These Questions for	r Administrative and Stat	istical Records			
6.	-	u filing for bankruptcy und b. You have nothing to repor	• • • •	heck this box and submit this form to the	court with yo	ur other sc	hedules.
7	■ Ye						
7.	vvnat k	ind of debt do you have?					
				debts are those "incurred by an individual of for statistical purposes. 28 U.S.C. § 15		a personal	, family, or
		our debts are not primarily e court with your other scheo		ve nothing to report on this part of the for	m. <i>Check this</i>	s box and s	submit this form to

Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

Debtor 1 Umeliah M Rahim Case number (if known)

3. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$_____

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Tot	al claim
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

Fill in this info	rmation to identify your	case and this filing	j:		
Debtor 1	Umeliah M Rahin	1			
Debtor 2	First Name	Middle Name	Last Name		
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States B	Sankruptcy Court for the:	EASTERN DISTRI	CT OF NEW YORK		
Case number					☐ Check if this is an
					amended filing
O((:-:-1 E	400A/D				
	orm 106A/B				
	le A/B: Prop		only once. If an asset fits in more than one		12/15
1. Do you own o	r have any legal or equitable	<u>· · </u>	Estate You Own or Have an Interest In ence, building, land, or similar property?		
1.1		What	is the property? Check all that apply		
47 Whale	en Court		Single-family home	Do not deduct secured cl	aims or exemptions. Put
Street address	s, if available, or other description		Duplex or multi-unit building Condominium or cooperative	the amount of any secure Creditors Who Have Clai	
D	- J NV 445		Manufactured or mobile home	Current value of the	Current value of the
City		′17-0000 □ ZIP Code □	Land Investment property	entire property? \$313,227.00	portion you own? \$313.227.00
Oity	Ciale		Timeshare	Describe the nature of y	, , , , , , , , , , , , , , , , , , ,
					ancy by the entireties, or
		wno	has an interest in the property? Check one Debtor 1 only	Tenancy by the En	tirety
Suffolk			Debtor 2 only		
County			Debtor 1 and Debtor 2 only	☐ Check if this is con	nmunity property
		Other	At least one of the debtors and another rinformation you wish to add about this item	(see instructions)	
			erty identification number:	i, sucii as locai	
		Deb	tor's Residence		
			your entries from Part 1, including any r here		\$313,227.00
Part 2: Describ	e Your Vehicles				
Do you own, le	ase, or have legal or equ		ny vehicles, whether they are registere Schedule G: Executory Contracts and Une		ehicles you own that
_	trucks, tractors, sport ut	ility vehicles, moto	rcycles		
■ No					
☐ Yes					

Official Form 106A/B Schedule A/B: Property page 1

Debtor	1 Umeliah M F	Case number (if known	n)
		tor homes, ATVs and other recreational vehicles, other vehicles, and accessories motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories	
■ No)		
☐ Ye	s		
		the portion you own for all of your entries from Part 2, including any entries for ed for Part 2. Write that number here=>	\$0.00
Part 3:	Describe Your Perso	nal and Household Items	
Do you	own or have any l	egal or equitable interest in any of the following items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
		urnishings ices, furniture, linens, china, kitchenware	
■ Y	es. Describe		
		Household Goods and Furnishings	
		Location: 47 Whalen Court, Brentwood NY 11717	\$1,500.00
■ N	mples: Televisions a including cell	nd radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music phones, cameras, media players, games	collections; electronic devices
Exar ■ N	other collection	figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coions, memorabilia, collectibles	n, or baseball card collections;
	es. Describe		
Exai	musical instr	graphic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes	s and kayaks; carpentry tools;
■ N	o es. Describe		
10. Fire <i>Exa</i> ■ N	amples: Pistols, rifle	s, shotguns, ammunition, and related equipment	
	es. Describe		
11. Clo t <i>Exa</i> □ N	amples: Everyday cl	othes, furs, leather coats, designer wear, shoes, accessories	
■ Y	es. Describe		
		Clothing	
		Location: 47 Whalen Court, Brentwood NY 11717	\$500.00
	amples: Everyday je	welry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems,	gold, silver
■ N	o es. Describe		
	n-farm animals amples: Dogs, cats, o	birds, horses	

Official Form 106A/B Schedule A/B: Property page 2

Debtor 1	Umeliah M Rah	im			Case number (if known)	
☐ Yes.	Describe					
14. Any o t	ther personal and h	ousel	nold items you die	d not already list, including any h	nealth aids you did not list	
■ No	Cive en esitia inform	ation				
⊔ Yes.	Give specific inform	nation.			_	
				Part 3, including any entries for		\$2,000.00
Part 4: De	escribe Your Financial	Asset	s			
Do you o	wn or have any lega	al or e	quitable interest i	in any of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
☐ No	ples: Money you hav	•		home, in a safe deposit box, and or	n hand when you file your petition	
— 163.					Cash on Hand Location: 47 Whalen Court, Brentwood NY 11717	\$50.00
Exam				counts; certificates of deposit; share ts with the same institution, list eac Institution name:		uses, and other similar
		17.1.	Checking	Bethpage FCU		\$150.00
		17.2.	Savings	Bethpage FCU		\$1,000.00
	s, mutual funds, or ples: Bond funds, inv			orokerage firms, money market acco	ounts	
☐ Yes.			Institution or issue	er name:		
joint	ublicly traded stocl venture	c and	interests in incor	porated and unincorporated busi	inesses, including an interest in	n an LLC, partnership, and
■ No □ Yes.	Give specific inform		about themne of entity:		% of ownership:	
Nego	<i>tiable instrument</i> s inc	lude p	ersonal checks, ca	gotiable and non-negotiable instr ashiers' checks, promissory notes, ransfer to someone by signing or de	and money orders.	
☐ Yes.	Give specific inform		about them uer name:			
Exam	ment or pension ac ples: Interests in IRA			403(b), thrift savings accounts, or	other pension or profit-sharing pla	ans
■ No □ Yes.	List each account se		ely. of account:	Institution name:		
Official For				Schedule A/B: Property		page 3

Official Form 106A/B Schedule A/B: Property

Debtor 1	Umeliah M Ra	him	Case number (if known)	
You	mples: Agreements w	deposits you have made so that you may	continue service or use from a company (electric, gas, water), telecommunications companies	s, or others
	S	Instituti	ion name or individual:	
_	`	a periodic payment of money to you, eithe	er for life or for a number of years)	
■ No □ Ye		er name and description.		
	S.C. §§ 530(b)(1), 52	IRA, in an account in a qualified ABLE 9A(b), and 529(b)(1).	Eprogram, or under a qualified state tuition progr	ram.
		tution name and description. Separately f	ile the records of any interests.11 U.S.C. § 521(c):	
25. Trus ■ No	-	re interests in property (other than any	rthing listed in line 1), and rights or powers exerc	isable for your benefit
	s. Give specific infor	mation about them		
	mples: Internet doma	lemarks, trade secrets, and other intell in names, websites, proceeds from royalti		
☐ Ye	s. Give specific infor	mation about them		
Exai ■ No	mples: Building perm		iation holdings, liquor licenses, professional licenses	
	s. Give specific infor			
Money o	or property owed to	you?		Current value of the portion you own? Do not deduct secured claims or exemptions.
_	efunds owed to you	1		
■ No □ Ye		nation about them, including whether you	already filed the returns and the tax years	
Exal ■ No			support, maintenance, divorce settlement, property se	ettlement
Exa	benefits; unpa	, disability insurance payments, disability aid loans you made to someone else	benefits, sick pay, vacation pay, workers' compensa	ation, Social Security
31. Inter	ests in insurance po	olicies		
<i>Exal</i> ■ No		ity, or life insurance; health savings accou	unt (HSA); credit, homeowner's, or renter's insurance	9
☐ Ye	s. Name the insuranc	e company of each policy and list its valu Company name:	le. Beneficiary:	Surrender or refund value:
If yo som	u are the beneficiary eone has died.		s died fe insurance policy, or are currently entitled to receiv	re property because

Official Form 106A/B Schedule A/B: Property page 4

Debtor	1 Umeliah M Rahim		Case number (if known)	
	nims against third parties, whether or not you have filed a la namples: Accidents, employment disputes, insurance claims, or		and for payment	
	es. Describe each claim			
34. O tl	ner contingent and unliquidated claims of every nature, incl	luding counterclaims	of the debtor and rights to	set off claims
	es. Describe each claim			
35. An	y financial assets you did not already list			
	No			
	es. Give specific information			
	dd the dollar value of all of your entries from Part 4, includi or Part 4. Write that number here		es you have attached	\$1,200.00
Part 5:	Describe Any Business-Related Property You Own or Have an Inte	erest In. List any real esta	ate in Part 1.	
37. Do <u>1</u>	ou own or have any legal or equitable interest in any business-rela	ited property?		
■ No	o. Go to Part 6.			
☐ Ye	es. Go to line 38.			
Part 6:	If you own or have an interest in farmland, list it in Part 1.			
_	you own or have any legal or equitable interest in any farm No. Go to Part 7.	i- or commercial fishin	ig-related property?	
_				
Ш	Yes. Go to line 47.			
Part 7:	Describe All Property You Own or Have an Interest in That Yo	ou Did Not List Above		
_E>	you have other property of any kind you did not already lis	it?		
	lo 'es. Give specific information			
	es. Give specific information			
54. A	dd the dollar value of all of your entries from Part 7. Write t	hat number here		\$0.00
Part 8:	List the Totals of Each Part of this Form			
	art 1: Total real estate, line 2			\$313,227.00
	art 2: Total vehicles, line 5	\$0.00		
	art 3: Total personal and household items, line 15	\$2,000.00		
	art 4: Total financial assets, line 36	\$1,200.00		
	art 5: Total business-related property, line 45	\$0.00		
	art 6: Total after and fishing-related property, line 52	\$0.00		
61. P	art 7: Total other property not listed, line 54	+ \$0.00		
62. T	otal personal property. Add lines 56 through 61	\$3,200.00	Copy personal property t	otal \$3,200.00
63. T	otal of all property on Schedule A/B. Add line 55 + line 62			\$316 427 00

Official Form 106A/B Schedule A/B: Property page 5

Fil	II in this inform	ation to identify your ca	se:			
	ebtor 1	Umeliah M Rahim				
		First Name	Middle Name	L	ast Name	
	ebtor 2 ouse if, filing)	First Name	Middle Name	L	ast Name	
Un	nited States Bar	kruptcy Court for the:	EASTERN DISTRICT OF NE	EW Y	ORK	
		_				
	ase number					Check if this is an amended filing
\bigcirc	fficial For	m 106C				
				!	F	
<u> </u>	cneauie	C: The Pro	perty You Cla	ıım	as Exempt	4/16
the nee cas	property you list eded, fill out and se number (if kn	sted on Schedule A/B: Pro I attach to this page as ma own).	perty (Official Form 106A/B) any copies of <i>Part 2: Additior</i>	as yo nal Pa	our source, list the property that you age as necessary. On the top of any	additional pages, write your name and
spe any fun exe	ecific dollar am / applicable standa ids—may be un emption to a pa	ount as exempt. Alterna atutory limit. Some exem nlimited in dollar amoun	tively, you may claim the f ptions—such as those for t. However, if you claim an	ull fai heal exen	ir market value of the property be th aids, rights to receive certain b nption of 100% of fair market valu	One way of doing so is to state a ing exempted up to the amount of senefits, and tax-exempt retirement the under a law that limits the t, your exemption would be limited
Pa	rt 1: Identify	the Property You Claim	as Exempt			
1.	Which set of	exemptions are you clai	ming? Check one only, ever	n if yo	our spouse is filing with you.	
	☐ You are cla	iming state and federal no	onbankruptcy exemptions. 1	11 U.S	S.C. § 522(b)(3)	
	You are cla	iming federal exemptions.	11 U.S.C. § 522(b)(2)			
2.	For any prop	erty you list on Schedule	e A/B that you claim as exe	mpt,	fill in the information below.	
		on of the property and line on the lists this property	n Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
			Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	47 Whalen (Court Brentwood, NY	\$313,227.00		\$20,096.00	11 U.S.C. § 522(d)(1)
	Debtor's Re Line from Sch	sidence			100% of fair market value, up to any applicable statutory limit	
		Goods and Furnishin 7 Whalen Court,	gs \$1,500.00		\$1,500.00	11 U.S.C. § 522(d)(3)
	Brentwood	,			100% of fair market value, up to any applicable statutory limit	
	Clothing	7 Whalen Court,	\$500.00		\$500.00	11 U.S.C. § 522(d)(3)
	Brentwood				100% of fair market value, up to any applicable statutory limit	
	Cash on Ha	nd 7 Whalen Court,	\$50.00		\$50.00	11 U.S.C. § 522(d)(5)
	Brentwood	•			100% of fair market value, up to any applicable statutory limit	
		Bethpage FCU	\$150.00		\$150.00	11 U.S.C. § 522(d)(5)
	Line from Sch	edule A/B: 17.1			100% of fair market value, up to any applicable statutory limit	

Official Form 106C

Jenic	T1 Umeliah M Rahim		Case number (if known)	
	rief description of the property and line on chedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Check only one box for each exemption.	
	avings: Bethpage FCU	\$1,000.00	\$1,000.00	11 U.S.C. § 522(d)(5)
L	ine nom schedule A/B. 11.2		☐ 100% of fair market value, up to any applicable statutory limit	
	re you claiming a homestead exemption			-1)
(+	Subject to adjustment on 4/01/19 and every	o years arter that for ca	ses nieu on or aner the date or adjustine	nt.)
(,	Subject to adjustment on 4/01/19 and every No	3 years after that for ca	ses liled on or after the date of adjustifier	ητ.)

Fill in this information	on to identify you	r case:				
	Jmeliah M Rahi irst Name		Name			
Debtor 2						
(Spouse if, filing)	irst Name	Middle Name Last	Name			
United States Bankru	ptcy Court for the:	EASTERN DISTRICT OF NEW YOR	K			
Case number						
(if known)						if this is an
					amend	led filing
Official Form 1	06D					
Schedule D:	Creditors	Who Have Claims Sec	cured	by Property	v	12/15
is needed, copy the Add number (if known).	ditional Page, fill it o	f two married people are filing together, bout, number the entries, and attach it to this				
1. Do any creditors have	e claims secured by	your property?				
_		is form to the court with your other sched	dules. Yo	u have nothing else to	report on this form.	
Yes. Fill in all	of the information b	pelow.				
Part 1: List All Se	cured Claims					
		nore than one secured claim, list the creditor s		Column A	Column B	Column C Unsecured
		a particular claim, list the other creditors in Pa al order according to the creditor's name.	π ∠. AS	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	portion If any
2.1 Fay Servicing	9	Describe the property that secures the cla	im: _	\$293,131.00	\$313,227.00	\$0.00
Creditor's Name		47 Whalen Court Brentwood, NY				
		11717 Suffolk County Debtor's Residence				
PO Box 8800	۵	As of the date you file, the claim is: Check a	all that			
Chicago, IL 6	_	apply. Contingent				
Number, Street, City,		☐ Unliquidated				
		☐ Disputed				
Who owes the debt?	Check one.	Nature of lien. Check all that apply.				
Debtor 1 only		An agreement you made (such as mortga car loan)	ige or secu	ured		
Debtor 2 only						
Debtor 1 and Debtor	•	☐ Statutory lien (such as tax lien, mechanic	s lien)			
☐ At least one of the de☐ Check if this claim		Judgment lien from a lawsuit	t Mortga	ana		
community debt	relates to a	Other (including a right to offset)	· mortge	190		
Date debt was incurred	d	Last 4 digits of account number	3651			
	-	olumn A on this page. Write that number he	re:	\$293,13		
If this is the last page Write that number he		he dollar value totals from all pages.		\$293,13	1.00	
Part 2: Liet Others	to Bo Notified for	a Dobt That You Already Listed				
LIST OTHERS	to be Notified to	a Debt That You Already Listed				

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Official Form 106D

Fill in this i	nformation to identify your o	case:					
Debtor 1	Umeliah M Rahim						
	First Name	Middle Name		Last Name			
Debtor 2 (Spouse if, filing) First Name	Middle Name	1	Last Name			
	•						
United State	es Bankruptcy Court for the:	EASTERN DIS	TRICT OF NEW Y	/ORK			
Case number	er						
(if known)						_	Check if this is an
						a	amended filing
Official F	orm 106E/F						
	e E/F: Creditors W	ho Have II	nsecured C	laims			12/15
Schedule G: E Schedule D: C left. Attach the name and cas	contracts or unexpired leases in Executory Contracts and Unexpired Creditors Who Have Claims Seculate E Continuation Page to this page on enumber (if known).	red Leases (Offici ured by Property. e. If you have no i	ial Form 106G). Do If more space is neo nformation to repo	not include eded, copy t	any creditors with partia he Part you need, fill it c	lly secured claims out, number the en	s that are listed in stries in the boxes on the
	reditors have priority unsecured						
_ `	o to Part 2.	i ciaiilis agailist y	ou r				
_ `	0 to Part 2.						
Part 2:	ist All of Your NONPRIORIT	V I Impagning Cl	alm a				
	reditors have nonpriority unsec	-	•				
⊔ No. Y	ou have nothing to report in this pa	art. Submit this forn	n to the court with yo	ur other sche	edules.		
Yes.							
unsecure than one	f your nonpriority unsecured cla d claim, list the creditor separately creditor holds a particular claim, lis	for each claim. Fo	r each claim listed, ic	dentify what t	ype of claim it is. Do not lis	st claims already inc	cluded in Part 1. If more
Part 2.							Total claim
4.1 LI A	Ambulatory Surgery	Lo	st 4 digits of accou	nt number	1035		\$789.79
	oriority Creditor's Name	La	st 4 digits of accou	int number	1033		φ103.13
	nter, LLC.	Wi	hen was the debt in	curred?	2017		_
Gle	Box 703 nwood Landing, NY 1154 ber Street City State Zlp Code		of the date you file	e, the claim i	s: Check all that apply		
Who	incurred the debt? Check one.						
■ [Debtor 1 only		Contingent				
	Debtor 2 only		Unliquidated				
	Debtor 1 and Debtor 2 only		Disputed				
	at least one of the debtors and ano	ther Ty	pe of NONPRIORIT	Y unsecured	d claim:		
	Check if this claim is for a comn	numity	Student loans				
debt					ration agreement or divorc	e that you did not	
_	e claim subject to offset?	•	oort as priority claims		g plans, and other similar	dobte	
■ N			•	•	y pians, and other similar	นธมเจ	
	'es		Other. Specify Mo	edical			_

Official Form 106 E/F

Debtor	1 Umeliah M Rahim		Case number (if know)	
4.2	Medical Arts	Last 4 digits of account number	1251	\$231.92
	Nonpriority Creditor's Name Radiology Group 375 East Main Street Bay Shore, NY 11706	When was the debt incurred?	2017	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Medical Se	rvices	
4.3	Northwell Health	Last 4 digits of account number	2246	\$278.00
	Nonpriority Creditor's Name Southside Hospital PO Box 29003	When was the debt incurred?	2018	
	New York, NY 10087-9003 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Medical		
4.4	Southside Hospital Nonpriority Creditor's Name	Last 4 digits of account number	2246	\$178.00
	Main Street	When was the debt incurred?	2006	
	Bay Shore, NY 11706 Number Street City State Zlp Code	As of the date you file, the claim i	a. Chook all that apply	
	Who incurred the debt? Check one.	As of the date you file, the claim i	5. Спеск ан шат арру	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	□Yes	Other. Specify Medical		

Official Form 106 E/F

Debtor 1	Umeliah	M Rahim		Case	number (if know)	
4.5 S	Synchrony	Bank	Last 4 digits of account numbe	er 6235	5	\$3,462.42
P	O. Box 9	60061	When was the debt incurred?	2007	7	
N		L 32896 City State Zlp Code the debt? Check one.	As of the date you file, the clair	m is: Chec	k all that apply	
_	Debtor 1 or		Пол			
		•	Contingent			
	Debtor 2 or	•	☐ Unliquidated			
		nd Debtor 2 only	Disputed			
_	_	e of the debtors and another	Type of NONPRIORITY unsecu	rea ciaim:		
		is claim is for a community	☐ Student loans			
debt Is the claim subject to offset?			☐ Obligations arising out of a se report as priority claims	paration a	greement or divorce that you did not	
	No		☐ Debts to pension or profit-sha	ring plans,	and other similar debts	
	Yes		Other. Specify Credit Ca	rd Debt		_
Part 3:	List Other	s to Be Notified About a De	bt That You Already Listed			
is trying have mo	to collect fro	om you for a debt you owe to so	about your bankruptcy, for a debt that omeone else, list the original creditor at you listed in Parts 1 or 2, list the ac or submit this page.	in Parts 1	or 2, then list the collection agen	cy here. Similarly, if you
Name and			On which entry in Part 1 or Part 2 did y		•	
ArStrat, PO Box			Line 4.4 of (Check one):		Creditors with Priority Unsecured C	
	MI 48232-	3720		Part 2:	Creditors with Nonpriority Unsecure	ed Claims
	1111 40202	0.20	Last 4 digits of account number			
Name and Portfoli	Address O Recover	y Assoc.	On which entry in Part 1 or Part 2 did you Line 4.5 of (Check one):		original creditor? Creditors with Priority Unsecured C	laims
	porate Blv	/d.		Part 2:	Creditors with Nonpriority Unsecure	ed Claims
Suite 1	VA 22502	•				
NOTIOIK	, VA 23502		Last 4 digits of account number			
Name and			On which entry in Part 1 or Part 2 did y		•	
Law Fire	inbrook m PC		Line 4.1 of (Check one):		Creditors with Priority Unsecured C	
77 Arka				Part 2:	Creditors with Nonpriority Unsecure	d Claims
Suite C	-					
Hauppa	uge, NY 1	1788				
			Last 4 digits of account number			
Part 4:	Add the A	mounts for Each Type of U	nsecured Claim			
	e amounts of unsecured cl		ims. This information is for statistica	l reporting	g purposes only. 28 U.S.C. §159. A	add the amounts for each
					Total Claim	
	6a.	Domestic support obligation	s	6a.	\$	<u>0</u>
To clair						
from Par		Taxes and certain other debt	s you owe the government	6b.	\$ 0.0	0
	6c.		injury while you were intoxicated	6c.	\$ 0.0	
	6d.	Other. Add all other priority un	secured claims. Write that amount here.	6d.	\$	<u>0</u>
	6e.	Total Priority. Add lines 6a thr	ough 6d.	6e.	\$	0
					Total Claim	
To	6f.	Student loans		6f.	\$0.0	0
clair	ns	2.11				
from Par	t 2 6g.	Obligations arising out of a s you did not report as priority	separation agreement or divorce that claims	6g.	\$ 0.0	0
	6h.		aring plans, and other similar debts	6h.	\$ 0.0	0
	6i.	Other. Add all other nonpriority	unsecured claims. Write that amount	6i.	\$ 4,940.1	3

Official Form 106 E/F

Debtor 1	Umeliah I	M Rahim	Case nu	umber (if know)		
		here.				
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	4,940.13	

Fill in this infor	mation to identify your	case:		
Debtor 1	Umeliah M Rahim	1		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT O	F NEW YORK	
Case number				
(if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	Name, Number	whom you have the street, City, State and ZIF	e contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			_
	City		State	ZIP Code	<u> </u>
2.2					
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	_
2.3					
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	_
2.4	•				
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.5					
	Name				
	Number	Street			
	City		State	ZIP Code	_

Official Form 106G

Fill in this	information to identify your	case:			
Debtor 1	Umeliah M Rahir	n			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing	ng) First Name	Middle Name	Last Name		
United Sta	tes Bankruptcy Court for the:	EASTERN DISTRICT C	F NEW YORK		
Case num	ber				
(if known)					☐ Check if this is an
					amended filing
Officia	l Form 106H				
Sched	lule H: Your Cod	lebtors			12/15
our name	and case number (if known you have any codebtors? (if). Answer every question			of any Additional Pages, write
20	, ou	you are ming a joint oace,	do not not ofther operation	ao a obabbion.	
■ No					
☐ Yes	3				
Arizon _	hin the last 8 years, have yo a, California, Idaho, Louisiana				states and territories include
☐ Yes	s. Did your spouse, former spo	ouse, or legal equivalent live	e with you at the time?		
in line Form out Co	2 again as a codebtor only	if that person is a guaran	tor or cosigner. Make	sure you have listed th 06G). Use Schedule D, S	with you. List the person shown e creditor on Schedule D (Official Schedule E/F, or Schedule G to fill ditor to whom you owe the debt
	Name, Number, Street, City, State and 2	ZIP Code		Check all schedules	•
				-	
3.1	Name			U Schedule D, line	
	rumo			☐ Schedule E/F, line ☐ Schedule G, line	
_				— Scriedule G, iirie	
	Number Street City	State	ZIP Code		
	Oity	Oldio	211 0000		
3.2	Name			Schedule D, line	
	INGING			☐ Schedule E/F, li	
_				☐ Schedule G, line	
	Number Street City	State	ZIP Code		
	Only	Jidio	Zir Coue		

Official Form 106H Software Copyright (c) 1996-2018 Best Case, LLC - www.bestcase.com

						_				
Fill	in this information to identify your c	ase:								
Del	otor 1 Umeliah M F	Rahim			_					
	otor 2				_					
Uni	ted States Bankruptcy Court for the	: EASTERN DISTRICT	OF NEW YORK							
	se number		-				k if this is: an amende	d filing	ing postpetition	chapter
_	("								following date:	
	fficial Form 106I					N	1M / DD/ Y	YYY		
S	chedule I: Your Inc	ome								12/15
spo atta	plying correct information. If you use. If you are separated and you ch a separate sheet to this form. Describe Employment	ır spouse is not filing wi	ith you, do not inclu	de infori	nati	on abou	t your spo	use. If n	nore space is	needed,
1.	Fill in your employment information.	ployment		Debtor 1			Debtor 2	or non-	filing spouse	
	If you have more than one job,	Employment status	☐ Employed	☐ Employed			☐ Emple	oyed		
	attach a separate page with information about additional	Employment status	■ Not employed				■ Not e	mployed		
	employers.	Occupation	Retired				Unemp	loyed		
	Include part-time, seasonal, or self-employed work.	Employer's name								
	Occupation may include student or homemaker, if it applies.	Employer's address								
		How long employed t	here?							
Par	t 2: Give Details About Mor	nthly Income								
	mate monthly income as of the duse unless you are separated.	ate you file this form. If	you have nothing to r	eport for	any	line, write	e \$0 in the	space. I	nclude your noi	n-filing
-	u or your non-filing spouse have mo e space, attach a separate sheet to		ombine the informatio	n for all e	mpl	oyers for	that perso	n on the	lines below. If	you need
						For Del	otor 1		ebtor 2 or iling spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$		0.00	\$	0.00	
3.	Estimate and list monthly overt	ime pay.		3.	+\$		0.00	+\$	0.00	
4.	Calculate gross Income. Add lin	ne 2 + line 3.		4.	\$		0.00	\$_	0.00	

Official Form 106I Schedule I: Your Income page 1

Debt	tor 1	Umeliah M Rahim	-	Case	e number (if k	nown)				
				Fo	r Debtor 1			· Debtor n-filing s		
	Cop	by line 4 here	4.	\$		0.00	\$		0.00	_
5.	l ist	all payroll deductions:								
0.	5a.	Tax, Medicare, and Social Security deductions	5a.	\$		0.00	\$		0.00	
	5b.	Mandatory contributions for retirement plans	5b.	. –		0.00	\$ \$		0.00	_
	5c.	Voluntary contributions for retirement plans	5c.			0.00	\$_	-	0.00	_
	5d.	Required repayments of retirement fund loans	5d.	\$		0.00	\$		0.00	_
	5e.	Insurance	5e.	\$	(0.00	\$		0.00	_
	5f.	Domestic support obligations	5f.	\$		0.00	\$		0.00	
	5g.	Union dues	5g.			0.00	\$_		0.00	_
	5h.	Other deductions. Specify:	_ 5h.	+ \$_		0.00	+ \$_		0.00	_
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$_	(0.00	\$_		0.00	_
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$_	(0.00	\$_		0.00	_
8.	List 8a.	t all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$		0.00	\$		0.00	
	8b.	Interest and dividends	8b.			0.00	\$-		0.00	_
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$		0.00	\$		0.00	_
	8d.	Unemployment compensation	8d.	. –		0.00	\$-		0.00	_
	8e.	Social Security	8e.	\$	1,10		\$		0.00	_
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.	\$		0.00	\$		0.00	_
	8g.	Pension or retirement income	 8g.	\$		0.00	\$		0.00	_
	8h.	Other monthly income. Specify:	8h.	+ \$		0.00	+ \$		0.00	_
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$_	1,10	0.00	\$_		0.0	0
10.	Cal	culate monthly income. Add line 7 + line 9.	10.	£	1,100.00	+ \$		0.00	= \$	1,100.00
		I the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.			1,100100	* -			1 L _	1,100.00
11.										
12.		the amount in the last column of line 10 to the amount in line 11. The restet that amount on the Summary of Schedules and Statistical Summary of Certailies						12.	\$Combi	
13	Do	you expect an increase or decrease within the year after you file this form	?						month	ly income
		No.	-							
		Yes. Explain:								

Official Form 106I Schedule I: Your Income page 2

Fill	in this information to identify your case:				
Deb	utor 1 Umeliah M Rahim			ck if this is: An amended filing	
	ouse, if filing)		_	•	ving postpetition chapter the following date:
Unit	ed States Bankruptcy Court for the: EASTERN DISTRICT OF NEW YO	PRK	-	MM / DD / YYYY	
l	e numbernown)				
	fficial Form 106J				
	chedule J: Your Expenses				12/15
info	as complete and accurate as possible. If two married people are ormation. If more space is needed, attach another sheet to this for nber (if known). Answer every question.	filing together, bot orm. On the top of a	h are equ any addition	ally responsible fo onal pages, write y	r supplying correct our name and case
Par 1.	t 1: Describe Your Household Is this a joint case?				
	■ No. Go to line 2. □ Yes. Does Debtor 2 live in a separate household?				
	☐ No ☐ Yes. Debtor 2 must file Official Form 106J-2, Expenses in	for Separate Househ	old of Deb	tor 2.	
2.	Do you have dependents? ■ No				
	Do not list Debtor 1 and Debtor 2. Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor 2		Dependent's age	Does dependent live with you?
	Do not state the dependents names.				□ No □ Yes
					□ No
					☐ Yes ☐ No
					□ Yes
					□ No
_	De verm ermene e include				☐ Yes
3.	Do your expenses include expenses of people other than yourself and your dependents?				
Est exp	t 2: Estimate Your Ongoing Monthly Expenses imate your expenses as of your bankruptcy filing date unless yourness as of a date after the bankruptcy is filed. If this is a suppliblicable date.				
the	lude expenses paid for with non-cash government assistance if value of such assistance and have included it on Schedule I: Yoficial Form 106I.)			Your expe	enses
4.	The rental or home ownership expenses for your residence. In payments and any rent for the ground or lot.	clude first mortgage	4. \$	\$	0.00
	If not included in line 4:				
	4a. Real estate taxes		4a. \$	5	0.00
	4b. Property, homeowner's, or renter's insurance		4b. \$		0.00
	4c. Home maintenance, repair, and upkeep expenses		4c. \$		0.00
5.	 4d. Homeowner's association or condominium dues Additional mortgage payments for your residence, such as homeometric payments. 	ne equity loans	4d. \$ 5. \$		0.00 0.00

Debtor 1	Umeliah M Rahim	Case number (if k	known)
6. Utili	ties:		
6a.	Electricity, heat, natural gas	6a. \$	220.00
6b.	Water, sewer, garbage collection	6b. \$	0.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c. \$	150.00
6d.	Other. Specify:	6d. \$	0.00
	d and housekeeping supplies	7. \$	350.00
	dcare and children's education costs	8. \$	
		·	0.00
	hing, laundry, and dry cleaning	9. \$	50.00
	sonal care products and services	10. \$	0.00
	lical and dental expenses	11. \$	25.00
	nsportation. Include gas, maintenance, bus or train fare.	12. \$	150.00
	not include car payments. ertainment, clubs, recreation, newspapers, magazines, and books	13. \$	0.00
		· —	-
	ritable contributions and religious donations	14. \$	0.00
5. Ins u			
	not include insurance deducted from your pay or included in lines 4 or 20. Life insurance	15a. \$	0.00
	Health insurance	15a. \$ 15b. \$	0.00
	Vehicle insurance	· · · · · · · · · · · · · · · · · · ·	
		· —	156.00
	Other insurance. Specify:	15d. \$	0.00
6. Taxe Spe	es. Do not include taxes deducted from your pay or included in lines 4 or 20.	16. \$	0.00
	allment or lease payments:	10. Ψ	0.00
	Car payments for Vehicle 1	17a. \$	0.00
	Car payments for Vehicle 2	17b. \$	0.00
	Other. Specify:	17c. \$	0.00
	Other. Specify:	176. ψ 17d. \$	0.00
	r payments of alimony, maintenance, and support that you did not report		0.00
	ucted from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106		0.00
9. Oth	er payments you make to support others who do not live with you.	***	0.00
Spe		19.	0.00
	er real property expenses not included in lines 4 or 5 of this form or on S		come.
	Mortgages on other property	20a. \$	0.00
	Real estate taxes	20b. \$	0.00
	Property, homeowner's, or renter's insurance	20c. \$	0.00
	Maintenance, repair, and upkeep expenses	20d. \$	0.00
	Homeowner's association or condominium dues	20e. \$	0.00
		· <u> </u>	
1. Othe	er: Specify:	21. +\$	0.00
2. Calc	culate your monthly expenses		
22a.	Add lines 4 through 21.	\$	1,101.00
22b.	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-	2 \$	
	Add line 22a and 22b. The result is your monthly expenses.	\$	1,101.00
£20.	The mile LLG and LLD. The result to your monthly expenses.		1,101.00
	culate your monthly net income.		
23a.	Copy line 12 (your combined monthly income) from Schedule I.	23a. \$	1,100.00
23b.	Copy your monthly expenses from line 22c above.	23b\$	1,101.00
23c.	Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> .	23c. \$	-1.00
	The result is your monthly her income.	00. [+	
	you expect an increase or decrease in your expenses within the year after		
For e	example, do you expect to finish paying for your car loan within the year or do you expect		
modi	fication to the terms of your mortgage?		
	lo.		
ΠY	'es. Explain here:		

Fill in this infor	rmation to identify your	case:			
Debtor 1	Umeliah M Rahim				
Dahtano	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States B	ankruptcy Court for the:	EASTERN DISTRICT O	F NEW YORK		
Case number					
(if known)					Check if this is an amended filing
Official For					
Declara	tion About a	n Individual	Debtor's Sch	nedules	12/15
	gn Below ay or agree to pay some	one who is NOT an attor	ney to help you fill out ba	nkruptcy forms?	
■ No					
☐ Yes.	Name of person				cy Petition Preparer's Notice, d Signature (Official Form 119)
	alty of perjury, I declare re true and correct.	that I have read the sum	mary and schedules filed	with this declaration ar	nd
X /s/ Um	neliah M Rahim		X		
	ah M Rahim ure of Debtor 1		Signature of D	ebtor 2	
Date	7/31/18		Date		

Official Form 106Dec

Fill	in th	is informa	ation to identify your	case:				
Del	otor 1		Umeliah M Rahim					
Del	otor 2		First Name	Middle Name	ı	Last Name		
	ouse if, t		First Name	Middle Name	ı	Last Name		
Uni	ted S	tates Bank	ruptcy Court for the:	EASTERN DISTRICT OF	NEW Y	ORK		
Cas	se nui	mber						
(if kr	nown)							Check if this is an amended filing
∩f	fici	al Fori	m 107					
				Affairs for Individ	duals	Filing for B	ankruptcy	4/16
info	rmati	on. If mo		le. If two married people a attach a separate sheet to tion.				
Par	t 1:	Give De	tails About Your Mar	ital Status and Where You	Lived I	Before		
1.	Wha	t is your o	current marital status	?				
		Married Not marrie	ed					
2.	Duri	ng the las	t 3 years, have you li	ved anywhere other than	where y	ou live now?		
		No						
			all of the places you liv	red in the last 3 years. Do no	ot includ	e where you live now	<i>'</i> .	
	Dek	otor 1 Prio	r Address:	Dates Debtor 1 lived there		Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
3. state				er live with a spouse or leg fornia, Idaho, Louisiana, Ne				
		No						
		Yes. Mak	e sure you fill out <i>Sch</i> e	edule H: Your Codebtors (O	fficial Fo	rm 106H).		
Par	t 2	Explain	the Sources of Your	Income				
4.	Fill in	the total	amount of income you	ployment or from operatin received from all jobs and a nave income that you receive	all busin	esses, including part-	time activities.	lendar years?
		No						
		Yes. Fill in	n the details.					
				Debtor 1			Debtor 2	
				Sources of income Check all that apply.	(befo	es income are deductions and asions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)

Official Form 107

De	btor 1	Um	eliah M R	Rahim				Cas	se number (if known)			
5.	Includ	de inc	ome regard	lless of wheth	er that inco	ome is taxable. Exa	imples o	us calendar years'	alimony; child supp	port; Social S	ecurity, unemploymer	nt,
								ived together, list it			id gambling and lottery	/
	List e	each s	ource and t	the gross inco	me from ea	ach source separat	ely. Do r	not include income	that you listed in lir	ne 4.		
		No										
		Yes. F	Fill in the de	etails.								
					Debtor 1				Debtor 2			
					Sources Describe	of income below.	each (befor	s income from source re deductions and sions)	Sources of inc Describe below		Gross income (before deductions and exclusions)	
Pa	rt 3:	List	Certain Pa	yments You	Made Befo	ore You Filed for E	3ankrur	otcy				
												_
 Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incindividual primarily for a personal, family, or household purpose." 						11(8) as "incurred by a	n					
			0	90 days befo	re you filed	I for bankruptcy, die	d you pa	y any creditor a tot	al of \$6,425* or mo	re?		
			□ No.	Go to line 7								
			□ Yes	paid that cr not include	editor. Do n payments t	not include paymen to an attorney for th	its for do nis bankr	mestic support obli ruptcy case.	gations, such as ch	nild support a	the total amount you and alimony. Also, do	
			* Subject	to adjustmen	t on 4/01/19	and every 3 years	after th	at for cases filed or	n or after the date o	if adjustment	t.	
	•	Yes.				re primarily consu I for bankruptcy, did		ots. ly any creditor a tot	al of \$600 or more?	?		
			No.	Go to line 7								
			□ Yes		ments for d	domestic support of		of \$600 or more an s, such as child sup			t creditor. Do not include payments to a	n
	Cred	ditor's	Name and	d Address		Dates of payme	nt	Total amount paid	Amount you still owe	Was this	payment for	
7.	Inside of wh a bus alimo	ers ind nich yo siness ony.	clude your r ou are an of	elatives; any ficer, director	general par , person in	rtners; relatives of a control, or owner o	any gene f 20% or		erships of which yo g securities; and ar	ou are a gene ny managing	eral partner; corporation agent, including one f	
	_	No Voc. I	ict all navn	nents to an in	sidor							
			Name and		sider.	Dates of payme	nt	Total amount	Amount you	Reason for	or this payment	
								paid	still owe			
8.	insid	ler?			•	cy, did you make a		ments or transfer	any property on a	ccount of a	debt that benefited a	ın
	_	No Par		3		5 ,						
	_		_ist all payn	nents to an in	sider							
	Insid	der's	Name and	Address		Dates of payme	nt	Total amount paid	Amount you still owe		or this payment editor's name	

Deb	otor 1 Umeliah M Rahim		Case number (if known)	
Par	t 4: Identify Legal Actions, Repossessi	ions, and Foreclosures			
9.	Within 1 year before you filed for bankrul List all such matters, including personal injumodifications, and contract disputes.				
	■ No □ Yes. Fill in the details.				
	Case title Case number	Nature of the case	Court or agency	Status of th	e case
10.	Within 1 year before you filed for bankrup Check all that apply and fill in the details be		rty repossessed, foreclosed,	garnished, attached	I, seized, or levied?
	No. Go to line 11.Yes. Fill in the information below.				
	Creditor Name and Address	Describe the Property Explain what happened		Date	Value of the property
11.	Within 90 days before you filed for bankr			titution, set off any a	mounts from your
	accounts or refuse to make a payment be No Yes. Fill in the details.	ecause you owed a debt?			
	Creditor Name and Address	Describe the action the	creditor took	Date action was taken	Amount
12.	Within 1 year before you filed for bankru court-appointed receiver, a custodian, or		rty in the possession of an a	ssignee for the bene	efit of creditors, a
	☐ Yes				
Par					
13.	Within 2 years before you filed for bankro No Yes. Fill in the details for each gift.	uptcy, did you give any gifts	s with a total value of more th	an \$600 per person`	,
	Gifts with a total value of more than \$60 per person	O Describe the gifts		Dates you gave the gifts	Value
	Person to Whom You Gave the Gift and Address:				
14.	■ No		or contributions with a total	value of more than	\$600 to any charity?
	Yes. Fill in the details for each gift or co Gifts or contributions to charities that t		contributed	Dates you	Value
	more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code	a)		contributed	
Par	t 6: List Certain Losses				
15.	Within 1 year before you filed for bankru or gambling?	ptcy or since you filed for b	ankruptcy, did you lose anyth	ning because of thef	t, fire, other disaster,
	■ No □ Yes. Fill in the details.				
	Describe the property you lost and how the loss occurred	Describe any insurance co		Date of your loss	Value of property lost
		Include the amount that insurinsurance claims on line 33 c		1,500	1031

Debtor 1 **Umeliah M Rahim** Case number (if known) Part 7: List Certain Payments or Transfers 16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. ☐ No Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment Amount of **Address** transferred or transfer was payment Email or website address made Person Who Made the Payment, if Not You Adam C. Gomerman, Esq. **Attorney Fees** 7/9/18 \$1,525.00 807 East Jericho Turnpike **Huntington Station, NY 11746** agomerman@optonline.net 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. No Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment Amount of Address transferred or transfer was payment made Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. Nο п Yes. Fill in the details. **Person Who Received Transfer** Description and value of Describe any property or Date transfer was Address property transferred payments received or debts made paid in exchange Person's relationship to you Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) Yes. Fill in the details. Name of trust Description and value of the property transferred **Date Transfer was** made Part 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.

No

П Yes. Fill in the details.

Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)

Last 4 digits of account number

Type of account or instrument

Date account was closed, sold, moved, or transferred

Last balance before closing or transfer

Case number (if known)

21.	Do you now have, or did you have within 1 year cash, or other valuables?	before you filed for bankruptcy, any	y safe deposit box or other deposito	ry for securities,
	■ No □ Yes. Fill in the details.			
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?
22.	Have you stored property in a storage unit or pla	ace other than your home within 1 y	/ear before you filed for bankruptcy?	•
	■ No □ Yes. Fill in the details.			
	Name of Storage Facility	Who else has or had access	Describe the contents	Do you still
	Address (Number, Street, City, State and ZIP Code)	to it? Address (Number, Street, City, State and ZIP Code)	bescribe the contents	have it?
Par	19: Identify Property You Hold or Control for S	Someone Else		
23.	Do you hold or control any property that someone for someone.	ne else owns? Include any property	you borrowed from, are storing for	, or hold in trust
	■ No □ Yes. Fill in the details.			
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value
Par	110: Give Details About Environmental Informa	tion		
For	he purpose of Part 10, the following definitions a	apply:		
	Environmental law means any federal, state, or I toxic substances, wastes, or material into the air regulations controlling the cleanup of these sub	r, land, soil, surface water, groundv	- ·	
	Site means any location, facility, or property as of to own, operate, or utilize it, including disposal s	defined under any environmental la	w, whether you now own, operate, o	or utilize it or used
	Hazardous material means anything an environmental hazardous material, pollutant, contaminant, or s		waste, hazardous substance, toxic s	ubstance,
Rep	ort all notices, releases, and proceedings that yo	u know about, regardless of when	they occurred.	
24.	Has any governmental unit notified you that you	may be liable or potentially liable ι	under or in violation of an environme	ental law?
	■ No			
	Yes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
25.	Have you notified any governmental unit of any	release of hazardous material?		
	■ No			
	Yes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice

Debtor 1 Umeliah M Rahim

Case number (if known)

26.	Have you been a party in any judicial or adm	ninistrative proceeding under any envir	ronmental law? Include settlements a	nd orders.				
	■ No □ Yes. Fill in the details.							
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case				
Par	111: Give Details About Your Business or C	Connections to Any Business						
27.	7. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?							
☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time								
☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)☐ A partner in a partnership								
								☐ An officer, director, or managing exe
	☐ An owner of at least 5% of the voting	g or equity securities of a corporation						
	■ No. None of the above applies. Go to P	art 12.						
	☐ Yes. Check all that apply above and fill	in the details below for each business.						
	Business Name Address	Describe the nature of the business	Employer Identification number Do not include Social Security n	umber or ITIN				
	(Number, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	·					
28.	Dates business existed Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.							
	■ No							
	Yes. Fill in the details below.							
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued						

Debtor 1 Umeliah M Rahim

Debtor	Umeliah M Rahim		Case number (if known)				
Part 12	Sign Below						
I have re are true with a b	ead the answers on this <i>Statement of Fi</i>	a false statement, concealing pro	nts, and I declare under penalty of perjury that the answers perty, or obtaining money or property by fraud in connection p to 20 years, or both.				
/s/ Um	neliah M Rahim						
	ah M Rahim ure of Debtor 1	Signature of Debtor 2					
Date	7/31/18	Date					
Did you ■ No □ Yes	attach additional pages to Your Statem	nent of Financial Affairs for Indivi	duals Filing for Bankruptcy (Official Form 107)?				
Did you ■ No	pay or agree to pay someone who is no	ot an attorney to help you fill out	bankruptcy forms?				
☐ Yes.	Yes. Name of Person Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).						

Fill in this inform	mation to identify your o	ase:				
Debtor 1	Umeliah M Rahim					
Debtor 2	First Name	Middle Name		Last Name		
(Spouse if, filing)	First Name	Middle Name		Last Name	_	
United States Ba	nkruptcy Court for the:	EASTERN DISTR	RICT OF NEV	V YORK		
Case number (if known)						☐ Check if this is an amended filing
Official Fo		n for Indiv	/iduals	Filing Under Ch	apter 7	7 12/15
	vidual filing under chap	, ,	ll out this for	m if:		
■ you have leas You must file this	ver is earlier, unless the	nd the lease has n thin 30 days after	you file you	r bankruptcy petition or by the ause. You must also send copie		
	eople are filing together and date the form.	in a joint case, bo	oth are equal	ly responsible for supplying co	orrect inform	ation. Both debtors must
	and accurate as possibl our name and case num		s needed, at	tach a separate sheet to this fo	rm. On the to	op of any additional pages,
Part 1: List Yo	our Creditors Who Have	Secured Claims				
1. For any creditorinformation be		rt 1 of Schedule D	: Creditors	Who Have Claims Secured by P	Property (Off	icial Form 106D), fill in the
Identify the cre	editor and the property th	at is collateral	What do y secures a	ou intend to do with the prope debt?	erty that	Did you claim the property as exempt on Schedule C?
Creditor's F	ay Servicing		■ Surren	der the property.		□ No
name:				the property and redeem it.		■ Yes
Description of	47 Whalen Court B			the property and enter into a rmation Agreement.		. 65
property securing debt:	NY 11717 Suffolk (Debtor's Residence		☐ Retain	the property and [explain]:		
For any unexpire in the information	n below. Do not list rea	se that you listed estate leases. Un	expired leas	G: Executory Contracts and Uses are leases that are still in efdoes not assume it. 11 U.S.C. §	fect; the lea	ases (Official Form 106G), fill se period has not yet ended.
Describe your u	nexpired personal prop	erty leases			Will	the lease be assumed?
Lessor's name: Description of lea	ased					No
Property:						Yes
Lessor's name: Description of lea	ased					No
Property:						Yes
Lessor's name:						No
Official Form 108		Statement of Ir	tantion for I	ndividuals Filing Under Chante	r 7	nage 1

page 1

Deb	otor 1	Umeliah M Rahim	Case number (if known)	
	scription perty:	n of leased		☐ Yes
1 10	porty.			Li Yes
	sor's n	******		□ No
	scriptio perty:	n of leased		☐ Yes
				La res
	sor's n			□ No
	scription perty:	n of leased		☐ Yes
	. ,			L Tes
	sor's n			□ No
	scriptio perty:	n of leased		☐ Yes
	. ,			L Tes
	sor's n			□ No
	scription perty:	n of leased		☐ Yes
Par	t 3:	Sign Below		
Ind	or non	alty of porium. I dealare that I have	dicated my intention about any property of my estate that se	ourse a debt and any personal
		nat is subject to an unexpired lease.	dicated my intention about any property of my estate that se	cures a debt and any personal
X	/s/ U	meliah M Rahim	X	
^		liah M Rahim	Signature of Debtor 2	
	Signa	ature of Debtor 1		
	Date	7/31/18	Date	
			_	

Fill in this infor	rmation to identify your case:				only as d	irected in	this form and in	Form
Debtor 1	Umeliah M Rahim		12:	2A-1Supp:				
Debtor 2 (Spouse, if filing)				■ 1. There	is no pres	umption o	f abuse	
United States	Bankruptcy Court for the: Eastern District of	New York		applie		nade unde	ne if a presump er <i>Chapter 7 Me</i>	
Case number (if known)				☐ 3. The M	eans Test	does not	apply now beca	
				☐ Check i				y later.
Official F	orm 122A - 1			LI CHECK	1 11115 15 a	ii ailiellu	eu illing	
	7 Statement of Your Cur	rent Mor	nthly Inc	ome				12/15
-								
attach a separat case number (if	and accurate as possible. If two married people a e sheet to this form. Include the line number to w known). If you believe that you are exempted fror ry service, complete and file Statement of Exemp	hich the additior n a presumption	nal information a of abuse becau	applies. On the se you do no	he top of ai	ny addition narily cons	al pages, write y sumer debts or b	your name and because of
Part 1: Ca	alculate Your Current Monthly Income							
1. What is y	your marital and filing status? Check one on	ly.						
☐ Not m	narried. Fill out Column A, lines 2-11.							
☐ Marrie	ed and your spouse is filing with you. Fill ou	t both Columns	A and B, lines	2-11.				
■ Marrie	ed and your spouse is NOT filing with you.	You and your s	spouse are:					
■ Liv	ing in the same household and are not lega	lly separated.	Fill out both Co	lumns A and	d B, lines 2	2-11.		
pe	ing separately or are legally separated. Fill on Inalty of perjury that you and your spouse are lear Ing apart for reasons that do not include evadir	egally separated	l under nonban	kruptcy law	that applie	es or that		
101(10A). Fo the 6 months	erage monthly income that you received from all a rexample, if you are filing on September 15, the 6-m, add the income for all 6 months and divide the total the same rental property, put the income from that p	onth period would by 6. Fill in the res	be March 1 throsult. Do not include	ugh August 3 ⁻ de any incom	1. If the amo	unt of your ore than on	monthly income vice. For example,	varied during if both
·				Column A Debtor 1		Column Debtor non-fili		
	ess wages, salary, tips, bonuses, overtime, adductions).	and commissio	ons (before all	\$	0.00	\$	0.00	
	and maintenance payments. Do not include 3 is filled in.	payments from	a spouse if	\$	0.00	\$	0.00	
of you or from an υ and room	Ints from any source which are regularly par r your dependents, including child support. Inmarried partner, members of your household Inmates. Include regular contributions from a sp Do not include payments you listed on line 3.	Include regular, your depender	contributions nts, parents,	\$	0.00	\$	0.00	
5. Net inco	me from operating a business, profession,				_			
_			tor 1					
	ceipts (before all deductions)	\$ <u>0.00</u> -\$ <u>0.00</u>						
•	and necessary operating expenses hly income from a business, profession, or farr	0.00	Copy here ->	\$	0.00	\$	0.00	
	me from rental and other real property			Ť		· ——		
J. 1101	and the same property	Deb	tor 1					
Gross red	ceipts (before all deductions)	\$0.00						
•	and necessary operating expenses	-\$ 0.00		_		•	0.00	
Net mont	hly income from rental or other real property	\$	Copy here ->		0.00	\$	0.00	
7. Interest,	dividends, and royalties			\$	0.00	\$	0.00	

Official Form 122A-1

Case number (if known)

					Column A Debtor 1		Column B Debtor 2 o non-filing		
8.	Unemploy	ment compensation			\$	0.00	\$	0.00	
		er the amount if you contend that the amoun Security Act. Instead, list it here:	t received was a ber	efit under					
	For you	\$	i	0.00					
	For your	r spouse\$	i	0.00					
9.		or retirement income. Do not include any and der the Social Security Act.	nount received that v	vas a	\$	0.00	\$	0.00	
10.	Do not incl received as	om all other sources not listed above. Speude any benefits received under the Social Se a victim of a war crime, a crime against hulerrorism. If necessary, list other sources on and	Security Act or paym manity, or internation	ents al or					
	•				\$	0.00	\$	0.00	
					\$	0.00	\$	0.00	
	To	otal amounts from separate pages, if any.		+	\$	0.00	\$	0.00	
11.		your total current monthly income. Add linn. Then add the total for Column A to the to		\$	0.00	+ \$	0.00	= \$	0.00
Part	2: Det	ermine Whether the Means Test Applies t	o You					Total c income	urrent monthly
12.	Calculate	your current monthly income for the year	. Follow these steps:	:					
		your total current monthly income from line			Cop	y line 11 l	nere=>	\$	0.00
	Multip	oly by 12 (the number of months in a year)						x 1	2
	12b. The re	esult is your annual income for this part of th	e form				12b	· \$	0.00
13.	Calculate	the median family income that applies to	you. Follow these st	eps:					
	Fill in the s	state in which you live.	NY						
	Fill in the n	number of people in your household.	2						
	To find a lis	nedian family income for your state and size st of applicable median income amounts, go n. This list may also be available at the bank	online using the link		in the separ	ate instruc	13. tions	\$6	68,087.00
14.	How do th	ne lines compare?							
	14a.	Line 12b is less than or equal to line 13. O Go to Part 3.	on the top of page 1,	check box	1, There is	no presum	nption of abus	e.	
	14b. □	Line 12b is more than line 13. On the top of Go to Part 3 and fill out Form 122A-2.	of page 1, check box	2, The pr	esumption c	of abuse is	determined b	y Form 12	2A-2.
Part	3: Sig	n Below							
	By sig	gning here, I declare under penalty of perjury	that the information	on this st	atement and	I in any atta	achments is tr	rue and co	orrect.
	Y /s/	Umeliah M Rahim							
	Un	neliah M Rahim Inature of Debtor 1							
	Date 7/3								
		// DD / YYYY							
	If you	checked line 14a, do NOT fill out or file Form	m 122A-2.						
	If you	checked line 14b, fill out Form 122A-2 and f	file it with this form.						

Umeliah M Rahim

Debtor 1

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Eastern District of New York

In re	Umeliah M Rahim		Case N	0.	
		Debtor(s)	Chapte	r 7	
	DISCLOSURE OF COMPENSA	ATION OF ATTO	ORNEY FOR	DEBTOR(S)
co	ursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I compensation paid to me within one year before the filing of the rendered on behalf of the debtor(s) in contemplation of or i	the petition in bankrupt	cy, or agreed to be p	aid to me, for ser	
	For legal services, I have agreed to accept		\$	1,525.0	0
	Prior to the filing of this statement I have received		\$	1,525.0	0
	Balance Due			0.0	0
2. T	he source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3. T	he source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4. ■	I have not agreed to share the above-disclosed compensation	ion with any other perso	on unless they are m	embers and asso	ciates of my law firm.
	I have agreed to share the above-disclosed compensation of copy of the agreement, together with a list of the names of				of my law firm. A
5. I	n return for the above-disclosed fee, I have agreed to render l	legal service for all asp	ects of the bankrupto	cy case, including	g:
b. c.	Analysis of the debtor's financial situation, and rendering a Preparation and filing of any petition, schedules, statement Representation of the debtor at the meeting of creditors and [Other provisions as needed] Negotiations with secured creditors to reduce reaffirmation agreements and applications as 522(f)(2)(A) for avoidance of liens on househ	t of affairs and plan wh d confirmation hearing, ce to market value; e s needed; preparation	ich may be required; and any adjourned lexemption plannii	hearings thereof;	n and filing of
6. B	y agreement with the debtor(s), the above-disclosed fee does Representation of the debtors in any dischar any other adversary proceeding.			nces, relief fro	om stay actions or
	CE	ERTIFICATION			
	certify that the foregoing is a complete statement of any agre nkruptcy proceeding.	eement or arrangement	for payment to me for	or representation	of the debtor(s) in
7/3	31/18	/s/ Adam C. Go	merman		
Da	te	Adam C. Gome			
		Signature of Attor			
		807 East Jerich	o Turnpike		
		Huntington Sta	tion, NY 11746		
			Fax: 631-759-292	5	
		agomerman@c			
		ivame of law firm			

United States Bankruptcy Court Eastern District of New York

In re	Umeliah M Rahim	Case No.		
		Debtor(s)	Chapter	7

VERIFICATION OF CREDITOR MATRIX

The above named debtor(s) or attorney for the debtor(s) hereby verify that the attached matrix (list of creditors) is true and correct to the best of their knowledge.

Date:	7/31/18	/s/ Umeliah M Rahim	
		Umeliah M Rahim	
		Signature of Debtor	
Date:	7/31/18	/s/ Adam C. Gomerman	
_		Signature of Attorney	
		Adam C. Gomerman	
		Adam C. Gomerman, Esq.	
		807 East Jericho Turnpike	
		Huntington Station, NY 11746	
		631-549-1111 Fax: 631-759-2925	

USBC-44 Rev. 9/17/98

ArStrat, LLC. PO Box 33720 Detroit, MI 48232-3720

Fay Servicing PO Box 88009 Chicago, IL 60680-1009

LI Ambulatory Surgery Center, LLC. PO Box 703 Glenwood Landing, NY 11547-0703

Medical Arts Radiology Group 375 East Main Street Bay Shore, NY 11706

Northwell Health Southside Hospital PO Box 29003 New York, NY 10087-9003

Portfolio Recovery Assoc. 120 Corporate Blvd. Suite 1 Norfolk, VA 23502

Southside Hospital Main Street Bay Shore, NY 11706

Synchrony Bank P.O. Box 960061 Orlando, FL 32896

The Levinbrook Law Firm, PC. 77 Arkay Drive Suite C1 Hauppauge, NY 11788

UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF NEW YORK

STATEMENT PURSUANT TO LOCAL **BANKRUPTCY RULE 1073-2(b)**

DEBTOR(S):	Umeliah M Rahim	CASE NO.:.
		(b), the debtor (or any other petitioner) hereby makes the following disclosure lowledge, information and belief:
was pending at any spouses or ex-spous partnership and one have, or within 180	time within eight years before thes; (iii) are affiliates, as defined or more of its general partners;	purposes of E.D.N.Y. LBR 1073-1 and E.D.N.Y. LBR 1073-2 if the earlier case ne filing of the new petition, and the debtors in such cases: (i) are the same; (ii) are in 11 U.S.C. § 101(2); (iv) are general partners in the same partnership; (v) are a (vi) are partnerships which share one or more common general partners; or (vii) ither of the Related Cases had, an interest in property that was or is included in the]
■ NO RELATED	CASE IS PENDING OR HAS B	BEEN PENDING AT ANY TIME.
☐ THE FOLLOW	ING RELATED CASE(S) IS PE	ENDING OR HAS BEEN PENDING:
1. CASE NO.:	JUDGE: DISTRICT	C/DIVISION:
CASE STILL PENI	OING (Y/N):	[If closed] Date of closing:
CURRENT STAT	US OF RELATED CASE:	
		(Discharged/awaiting discharge, confirmed, dismissed, etc.)
MANNER IN WH	ICH CASES ARE RELATED (A	Refer to NOTE above):
	LISTED IN DEBTOR'S SCHE F RELATED CASE:	DULE "A" ("REAL PROPERTY") WHICH WAS ALSO LISTED IN
2. CASE NO.:	JUDGE: DISTRICT	C/DIVISION:
CASE STILL PENI	DING (Y/N):	[If closed] Date of closing:
CURRENT STAT	US OF RELATED CASE:	(Discharged/awaiting discharge, confirmed, dismissed, etc.)
MANNER IN WH	ICH CASES ARE RELATED (A	Refer to NOTE above):
	LISTED IN DEBTOR'S SCHE F RELATED CASE:	DULE "A" ("REAL PROPERTY") WHICH WAS ALSO LISTED IN
3. CASE NO.:	JUDGE: DISTRICT	C/DIVISION:
CASE STILL PENI	DING (Y/N):	[If closed] Date of closing:

DISCLOSURE OF RELATED CASES (cont'd)	
CURRENT STATUS OF RELATED CASE: (Di	scharged/awaiting discharge, confirmed, dismissed, etc.)
MANNER IN WHICH CASES ARE RELATED (Refer to 1	
REAL PROPERTY LISTED IN DEBTOR'S SCHEDULE "A SCHEDULE "A" OF RELATED CASE:	A" ("REAL PROPERTY") WHICH WAS ALSO LISTED IN
<i>NOTE:</i> Pursuant to 11 U.S.C. § 109(g), certain individuals we be eligible to be debtors. Such an individual will be required	who have had prior cases dismissed within the preceding 180 days may not d to file a statement in support of his/her eligibility to file.
TO BE COMPLETED BY DEBTOR/PETITIONER'S ATTO	ORNEY, AS APPLICABLE:
I am admitted to practice in the Eastern District of New York	k (Y/N): Y
as indicated elsewhere on this form. /s/ Adam C. Gomerman	case is not related to any case now pending or pending at any time, except
Adam C. Gomerman Signature of Debtor's Attorney Adam C. Gomerman, Esq. 807 East Jericho Turnpike	Signature of Pro Se Debtor/Petitioner
Huntington Station, NY 11746 631-549-1111 Fax:631-759-2925	Signature of Pro Se Joint Debtor/Petitioner
	Mailing Address of Debtor/Petitioner
	City, State, Zip Code
Failure to fully and truthfully provide all information require	Area Code and Telephone Number

Failure to fully and truthfully provide all information required by the E.D.N.Y. LBR 1073-2 Statement may subject the debtor or any other petitioner and their attorney to appropriate sanctions, including without limitation conversion, the appointment of a trustee or the dismissal of the case with prejudice.

<u>NOTE</u>: Any change in address must be reported to the Court immediately IN WRITING. Dismissal of your petition may otherwise result.

USBC-17 Rev.8/11/2009